MILPERSMAN 1910-120

SEPARATION BY REASON OF CONVENIENCE OF THE GOVERNMENT - PHYSICAL OR MENTAL CONDITIONS

| Responsible Office | NAVPERSCOM (PERS-835) Active enlisted members | Phone: | DSN COM FAX | 882-4431/4428 (901) 874-4431 882-2754 |
|------------------------|---|--------|-------------------|---|
| | NAVPERSCOM (PERS-913) Inactive enlisted members | Phone: | DSN COM FAX | 882-4503 (901) 874-4503 882-2673 |
| NAVPERSCOM C CENTER | CUSTOMER SERVICE Phone: Toll Free 1-866-U ASK NPC | | | |

| References | (a) BUMEDINST 1300.2A |
|------------|--|
| | (b) NAVMED P-117, Manual of the Medical Department |
| | (c) SECNAVINST 1850.4E |
| | (d) DoD Instruction 1332.14 of 28 Aug 2008 |
| | (e) SECNAVINST 5300.30D |

1. Separation Authority (SA)

- a. Commanding Officer (CO), Navy Recruit Training Command (NAVCRUITRACOM) serves as SA for recruit personnel.
- b. COs with Special Courts-Martial Convening Authority (SPCMA) or higher.

2. Policy

a. Physical or behavioral conditions which impair a member's performance, but do not amount to a physical disability, are covered under this article. They do not amount to a disability, but can affect potential for continued Naval Service (see above references). Conditions included, but not limited to the list of conditions as outlined in references (a) through (c), which covers:

| CONDITIONS | | | |
|------------|--|--|--|
| (1) | Enuresis (bedwetting). | | |
| (2) | Sleepwalking and/or Somnambulism. | | |
| (3) | Dyslexia and other learning disorders. | | |
| (4) | Attention Deficit Hyperactivity Disorder. | | |
| (5) | Stammering or Stuttering. | | |
| (6) | Incapacitating fear of flying confirmed by | | |
| | psychiatric evaluation. | | |
| (7) | Airsickness, Motion Sickness, and/or Travel | | |
| | Sickness. | | |
| (8) | Phobic fear of Air, Sea, and Submarine Modes of | | |
| | Transportation. | | |
| (9) | Uncomplicated Alcoholism or Other Substance Use | | |
| | Disorder. | | |
| (10) | Mental retardation. | | |
| (11) | Adjustment Disorders. | | |
| (12) | Impulse Control Disorders. | | |
| (13) | Sexual Gender and Identity Disorders paraphilias. | | |
| (14) | Factitious Disorder. | | |
| (15) | Obesity. | | |
| (16) | Over height. | | |
| (17) | Psuedofolliculitis barbae of the face and/or neck. | | |
| (18) | Medical Contraindication to the Administration of | | |
| | Required Immunizations. | | |
| (19) | Significant allergic reaction to stinging insect | | |
| | venom. | | |
| (20) | Unsanitary habits. | | |
| (21) | Certain anemias - in the absence of unfitting | | |
| | sequelae - including G6PD deficiency, other | | |
| | inherited Anemia Trait, and Von Willebrand's | | |
| | Disease. | | |
| (22) | Allergy to Uniform Clothing or Wool. | | |
| (23) | Long Sleeper Syndrome. | | |
| (24) | Hyperlipidemia. | | |

- b. The Government or the member can initiate separation request per this article.
- (1) Command-initiated request: Per reference (d), involuntary separation processing may not be initiated until the Service member has been notified formally with NAVPERS 1070/613 Administrative Remarks, concerning performance deficiencies related to the physical/behavioral condition and advised of medical resources (if applicable) that may assist in the

member's retention. The CO must provide the member reasonable time to overcome deficiencies (if possible) as reflected in appropriate counseling or personnel records.

- (2) Service member-initiated request: May request separation based on a medical condition not amounting to disability which member's attending military physician believes exists and obviates the member's potential for continued Naval Service. Member may request separation only after all medical avenues of relief have been exhausted. The medical officer must document why member's condition renders member incapable of completing obligated service (OBLISERV) in an operational capacity. This request is considered a voluntary separation; therefore, there are no separation pay entitlements and Selective Reenlistment Bonus (SRB)/Enlistment Bonus (EB), if applicable, will be recouped.
- c. Whether command- or Service member-initiated, specific documentation is required from the medical officer that condition renders member incapable of completing member's OBLISERV, e.g., forced conversion, reassignment, etc. If the request is forwarded to Navy Personnel Command (NAVPERSCOM) for disposition without the specific documentation mentioned above, the request will be disapproved.
- d. NAVPERSCOM, Enlisted Distribution Division (PERS-40) can direct separation processing under this article for any member who is not worldwide assignable due to a medical condition. However, those members who have gone before a Physical Evaluation Board and found fit for duty are exempt from administrative separation processing under this article.
- 3. <u>Procedures</u>. Administrative separation (ADSEP) packages must include the following:
- a. NAVPERS 1070/613 which specifically addresses performance deficiencies related to physical or behavioral condition and resources available, unless Service member has requested the separation.
- b. Request for separation from Service member, if initiated by Service member.
- c. Administrative notification per MILPERSMAN 1910-402, if initiated by command.

- d. Letter of transmittal (recommendation for ADSEP) per MILPERSMAN 1910-600.
- e. Medical documentation from a medical officer supporting separation due to the condition, or suitability screening form for operational or overseas assignment, signed by a medical officer.
- f. If applicable, ADSEP processing message from NAVPERSCOM (PERS-40) based on operational unsuitability or assignment screening findings. This message is not authority to separate and does not constitute medical documentation; it is strictly direction to process for separation.
- g. Members whose cases have gone before the Physical Evaluation Board (PEB) and have been found to be fit to continue service shall not be involuntarily administratively separated for that condition.
- NOTE: (1) If CO determines the member has potential for continued Naval Service, albeit unable to execute operational duty orders, submit a separation package with CO's recommendation for retention. The package will be reviewed by NAVPERSCOM and Office of Chief of Naval Operations (OPNAV), Military Personnel Plans and Policy Division (N13), and retention will be determined based on needs of Navy.
- NOTE: (2) Per MILPERSMAN 1910-514, if an administrative board is required prior to a separation determination, the administrative board may not disregard or change the approve diagnosis of a medical officer. Members can introduce evidence as to the impact that such a diagnosis may have on their potential for productive future Naval Service.
- 4. <u>Characterization of Service</u>. Honorable (HON), unless an Entry Level Separation (ELS) (MILPERSMAN 1910-308) or General (Under Honorable Conditions) (GEN) (MILPERSMAN 1910-304), is warranted. Selected Reserve (SELRES) personnel are not eligible for ELS.
- 5. <u>Human Immunodeficiency Virus (HIV) Personnel</u>. Personnel enrolled in the HIV program are governed under reference (e) and are not included in this article.

SAMPLE PACKAGE COMMAND-INITIATED SEPARATION Letter of Transmittal Format

(Use proper letter format containing the following.)

(date)

From: Commanding Officer (unit name)

Fo: Commander, Navy Personnel Command (PERS-832/PERS-913)

Subj: (RATE/NAME/USN (R) (SSN (XXX-XX-1234, last four digits));

RECOMMENDATION FOR ADMINISTRATIVE SEPARATION

Ref: (a) MILPERSMAN 1910-600

Encl: (1) NAVPERS 1070/613 Administrative Remarks

- (2) Administrative Separation Notification
- (3) Medical Evaluation with separation recommendation
- (4) Bureau of Naval Personnel (BUPERS) directed Administrative Separation Processing message
- (5) Other enclosures as required
- 1. Per reference (a), the following information is submitted:
 - a. Reason for processing.
- b. Basic record data. Active duty (ACDU) start date; date of current enlistment; expiration of active obligated service (EAOS)/expiration of service (EOS); race/ethnicity; marital status and dependents; months on board; date and amount of most recent enlistment/reenlistment bonus; deployment status: deployed/pending deployment (number of months)/not deployed; pending orders (YES/NO/NA); age; total service (active, inactive); participated in Montgomery GI Bill (YES/NO/NA); specialized training (i.e., nuclear power).
 - c. Involvement with civil authorities (if applicable).
 - d. Summary of military and civilian offenses (if applicable).
 - e. Findings of administrative board (if applicable).
 - f. Recommendations of administrative board (if applicable).
- g. Type of discharge recommended by administrative board (if applicable).
- h. Comments of commanding officer (CO). (Must include why member's condition renders member incapable of completing obligated service (OBLISERV) in any capacity.)
 - i. Point of contact (POC)/location of command/telephone (DSN/COMM/E-Mail).

CO/Acting CO signature (not By direction)

Copy to:

Don CAF, WDC (29A)

(ISIC, TRANSITPERSU, PERSUPP DET where applicable)

NAVPERS 1070/613 Administrative Remarks

NAVPERS 1070/613 is located on the Navy Personnel Command Web site, can be accessed by following link http://www.public.navy.mil/bupers-npc/reference/forms/NAVPERS/Pages/default.aspx, and should contain the following statement:

(Date): ADMINISTRATIVE COUNSELING

- 1. You are hereby being counseled regarding your medical condition. You were diagnosed with (explain briefly the circumstances). Your present medical condition has not been considered a physical disability; however, it may be a disqualifying factor in determining your suitability for further naval service.
- 2. You are being afforded any and all medical assistance as required by your medical condition. You will adhere to any and all of the recommendations of your attending physician and or medical board.
- 3. Further assistance is available through: LPO, DEPARTMENT HEAD, COMMAND MASTER CHIEF, CHAPLAIN, XO, CO AND OFFICER OF THE MEDICAL CORPS.
- 4. This counseling is made to afford you an opportunity to undertake the recommended corrective action. Any failure to adhere to the guidelines cited above will make you eligible for administrative separation.

| SIGN AND | DATE |
|----------|------|
| | |
| | |
| WITNESS | |
| | |
| | |

NOTE: If the member refuses to sign, document such and have a commissioned officer sign NAVPERS 1070/613 as a witness.

NAVPERS 1910/32 Administrative Separation Notification Procedure

Ensure NAVPERS 1910/32 is used when ADSEP is command-initiated. It is located on the Navy Personnel Command Web site and can be accessed at the following link

http://www.public.navy.mil/BUPERS-NPC/REFERENCE/FORMS/NAVPERS/Pages/default.aspx.

SAMPLE PACKAGE ADMINISTRATIVE SEPARATION PER MEMBER'S REQUEST

(Use proper letter format containing the following.)

(date)

From: (Rate/Full Name/Branch/SSN (XXX-XX-1234, last four digits))

To: Separation Authority (Special Courts-Martial Convening

Authority (SPCMA) or higher)

Subj: REQUEST FOR SEPARATION BASED ON PHYSICAL OR BEHAVIORAL

CONDITION(S) NOT AMOUNTING TO A DISABILITY

Ref: (a) MILPERSMAN 1910-120

Encl: (1) Copy of medical documentation describing condition

(2) Copy of mishap/safety investigation (where applicable)

- 1. Per reference (a), I request separation based on the medical condition which I and or my attending physician believe exists, but does not amount to a disability per current Navy guidance. The medical condition is (briefly describe/explain medical condition) and is supported by enclosure (1).
- 2. The following information is provided:
 - a. Active Duty Start Date:
 - b. Expiration of Service:
 - c. Date Reported Current Command:
 - d. Projected Rotation Date (PRD):
- e. This medical condition (existed/did not exist) upon $\ensuremath{\mathsf{my}}$ entry into Navy.
- f. This medical condition (was/was not) the result of, or contributed to, my own misconduct.
- g. A mishap/safety investigation (was/was not) conducted regarding this medical injury/problem. If conducted, attach as enclosure (2).
- 3. Remarks: Explain the history of your medical condition and why it prevents you from completing your obligated service **in any capacity**.

| (Member's | Signature) |
|-----------|------------|

NOTE: CO's endorsement must verify information provided in paragraph 2 of member's letter is correct and, also, include why member's condition renders him or her incapable of completing OBLISERV in any capacity.